PART B - FEE(S) TRANSMITTAL MATCH & Return

Complete and ether with applicable fee(s), to:

Box ISSUE FEE Assistant Commissioner for Paterts Washington, D.C. 20231

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CUPRIENT CORRESPONDENCE ADDRESS (Note: Lagibly mark-up with any corrections or use Block 1)

Ronald A. Katz Technology Licensing, L.P. 9220 Sunset Blvd. Suite 315

Los Angeles, CA 90069

Note: The certificate of mailing below can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing.

Certificate of Mailing

I hereby certify that this Fee(s) Transmittal is being deposited with the
United States Postal Service with sufficient postage for first class mail in an
envelope addressed to the Box Issue Fee address above on the date
indicated below.

(Depositor's name)	APPEN	Anble
(Signature)	long	Opal
(Date)	113702	3 03

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/340,618	06/28/1999	RONALD A. KATZ	244/067-(664	4172

TITLE OF INVENTION: TELEPHONIC-INTERFACE GAME CONTROL SYSTEM

ł	TOTAL CLAIMS	APPLN, TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
	32	nonprovisional	NO	\$1280	\$0	\$1280	05/28/2002
(EXA	MINER	ART UNIT	CLASS-SUBCLAS	ss		
	WEAVER,	SCOTT LOUIS	2645	379-067100			
•	1. Change of correspon CFR 1.363). Use of PT but not required.	dence address or indicat O formi(s) and Customer	ion of "Fee Address" (37 Number are recommended	 the names of up t 	the patent front page, li o 3 registered patent atto ernatively, (2) the name	meys Reens VII	yper
	Change of corresponded Address form PTO/SI	ondence address (or Char B/122) attached.	nge of Correspondence		ig as a member a regi and the names of up		sson
	☐ "Fee Address" indi- PTO/SB/47) attached	cation (or "Fee Address"	Indication form	registered patent a is listed, no name v	ttomeys or agents. If no vill be printed,	name 3	

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE

NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Ronald A. Katz Technology Licensing LP. Los Angeles, California

	•		·		
Please check the appropriate assignee category or categorie	s (will not be printed on the patent)	individual	O corporation or other private group entity	O governmen	
4a. The following fee(s) are enclosed:	4b. Payment of Fee(s):				
🕏 lasue Fee	A check in the amount	of the fee(s) is en	closed.		
☐ Publication Fee	☐ Payment by credit card	☐ Payment by credit card. Form PTO-2038 is attached.			
CacAdvance Order - # of Copies 10	The Commissioner is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 501636 (enclose an extra copy of this form).				
The COMMISSIONER OF PATENTS AND TRADEMAR application identified above (Authorized Signature) Reena kuyper, Reg. No. 33.840	KS is requested to apply the lasue Fee (Date) 68/13/2002		ee (if any) or to re-apply any previously paid MEERCH2 00000113 09340618	issue fee to t	
NOTE: The Issue Fee and Publication Fee (if required) other than the applicant; a registered attorney or agent interest as shown by the records of the United States Paten	or the autiques or other perty in I	01 FC:142 02 FC:561	1280.00 0P 30.00 0P		
Burden Hour Statement: This form is estimated to take 0. depending on the needs of the individual case. Any common to complete this form should be sent to the Chief Informand Trademark Office, Washington, D.C. 20231. DO NO FORMS TO THIS ADDRESS. SEND FEES AND TO Assistant Commissioner for Patents. Washington, D.C. 20	ents on the amount of time required attion Officer, United States Patent of SEND FEES OR COMPLETED HIS FORM TO: Box Issue For				

TRANSMIT THIS FORM WITH FEE(S)

PTOL-85 (REV. 07-01) Approved for use through 01/31/2004. OMB 0651-0033

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE